



PUBLIC HEALTH CONNECTIONS

June – 2007 Volume 7, Issue 6

Office of Local and Rural Health



Roderick L. Bremby, Secretary
ernor

Kathleen Sebelius, Gov-

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GREENSBURG KANSAS



**BEFORE
MAY 5, 2007**

**AFTER
MAY 6, 2007**



PUBLIC HEALTH TASKFORCE VOLUNTEERS FOR GREENSBURG DISASTER RELIEF

by Barbara Berry, BSRN, MS

Geary Junction City Geary County Health Department Director of Nursing



Pat Rion, Crawford County Health Department and Patricia Hunter, Administrator Junction City-Geary County Health Department checking in with Janis Goedeke, Crawford County Health Officer, ICS Task Force Leader at Greensburg.

"Would you volunteer to assist tornado victims in Greensburg?" The question came from Patricia Hunter, administrator for the Junction City Geary County Health Department; and we gladly accepted. Years of disaster response training had prepared us for our mission. The administrator and three members of the nursing and administrative staff started out at 5:30 a.m. on the three-hour drive. The overwhelming devastation of the stark landscape engrossed our senses as we entered town. A twisted bike, broken doll, University Kansas (KU) mascot, and tattered American flag were remnants that attested to the strong family and community values of the Greensburg's citizens.

Public health operations were part of a multi-agency coordination (MAC) system with an emergency operations center (EOC). There were many agencies responding to the disaster such as Federal Emergency Management Agency (FEMA), Red Cross, Kansas National Guard, religious and private organizations. Each agency had its own incident command system (ICS); and we reported to a tent that served as the incident command post for public health with a sign that read "Kiowa County Health Department." The tent was located in the front yard of the severely damaged home of Mitzi Hesser, Director for Kiowa County Health Department and incident commander. The health department is located across the street from Mitzi's house in the county courthouse basement; but the courthouse was now closed due to severe storm damage. The Southeast Region's mobile health clinic was parked beside the ICS tent, and provided refrigeration and storage. For identification, we received white vests with health department in bold letters. Janice Goedeke, Crawford County Health Department Health Officer and ICS task force leader gave the mission brief.

The public health incident command system followed the National Incident Management System (NIMS) in deploying task force units of Kansas volunteers (for this incident a task force consisted of a nurse, admin person, and a mental health counselor). Each task force received a shopping cart with Tetanus/Diphtheria (Td) vaccine supplies, water, and snacks. The ICS command sectioned the town into divisions, and the task force leader gave each unit a specific area. Our task force rolled the shopping cart through the streets and within a few hours we had given about 50 Td boosters with lots of water and snacks.

The ICS command should be commended for the excellent idea of using shopping carts, ("Public Health on Wheels"). The shopping cart service brought preventive health to many victims and volunteers who were too preoccupied with recovery to seek care. The residents were good-natured, and affectionately called us the "Bag Ladies." We left with an appreciation of public health's critical role as interrelated with other organizations in a MAC system. We also witnessed the strength and hope of Greenberg's residents who embody the pioneer spirit of "Ad astra per aspera," "to the stars through difficulties."



Butler County Health Department staff (left to right), Vicky Wiebe, Carol Borger, Christi Bradshaw and Sandy DeWitt along with Sandy's friend, Charlene Siedhoff on Thursday, May 10, 2007 in front of the Lower 8 mobile van that was on the lawn of the Health Department Administrators house, that was used for the staging area for Tetanus clinics.

JOURNAL ENTRIES FROM GREENSBURG: PUBLIC HEALTH IN ACTION

by Bill Arneson
VP of Administration
KIPHS, Inc.



Kiowa County Courthouse before May 5.

As Mitzi Hesser, director of Kiowa County Health Department, climbed out of her house that had just been destroyed, she looked across the street at her public health department. The good news was that



Kiowa County Courthouse May 6, 2007

the department was located in the basement of the courthouse. The bad news was the building had suffered significant structural damage. Amazingly, she had the presence of mind to quickly remove various office contents, including the server, and several computers to a safe location. This action eliminated the challenge of finding and recovering backups that were most likely not existent, old, or destroyed.



Mitzi was finally able to call our office one week after the tornado. We had already discussed what would be needed and how we could help with retrieval of her database. The key piece would be a good backup or a server that wasn't damaged. The discussion with Mitzi resulted in hope and concern. She did not have any good back ups and had not had a chance to verify that the server was functional. KIPHS, Inc. staff went to Greensburg immediately after the phone call. The site was overwhelming. Pictures really don't do justice to the loss seen while onsite. When the server was examined it appeared undamaged. Once the server was setup at the KIPHS office, it worked perfectly! The only cleaning needed was

routine removal of dust. The server booted quickly and worked as if nothing had happened.

Next, KIPHS staff moved the Kiowa county database to a KIPHS notebook computer to allow Kiowa staff to review client information as well as process clients. On Tuesday, May 15, Bill Arneson with KIPHS was able to deliver the notebook computer along with two extra batteries to the temporary site. While onsite, Bill had a chance to setup a printer and provide some inventory information that was needed for an emergency planning meeting. As people approached the health department's temporary tent and RV, staff had the ability to reference records as needed.



At lunch, Bill asked Mitzi if he could share her story with Kansas counties as a lesson learned about backing up computer records. Mitzi said, "Please, use me as an example. Tell everyone that they must have good backup!" Learn a lesson - back up your data. Not all of us could think quickly enough to dig into a tornado swept building to retrieve our server. And, not all of us would be lucky enough to find it in perfect working order. For most of us, backups would be our only chance.

If you have any questions or concerns about how to backup KIPHS data, please call the KIPHS office.

*by Cyndi Treaster
Project Manager of Farmworker Health/Refugee Health Coordinator
KDHE - OLRH*



Tina Guenther, a Low German/English speaking health promoter with the Kansas Statewide Farmworker Health Program, traveled to Greensburg soon after the Tornado to visit with the two Low German speaking farmworker families who live and work in that community. The day of the tornado, the first farmworker family's television was on and Helena (not her real name) understood enough English to comprehend the warning giving residents 20 minutes to find shelter. She called her husband and because they had no basement, they and their four children left in their vehicle to go to the field of their employer and find shelter in an old tail

water pit. They were unhurt by the tornado and only lost the garage of their home. Before leaving to seek shelter, Helena called the second farmworker family. This family had not heard the warning but said they were going to stay in their trailer. Helena insisted they go find shelter elsewhere. When they left the trailer a neighbor motioned them over to their home and they went to the basement. After the tornado they emerged to find the trailer totally demolished. Like many in Greensburg they are trying to put their lives back together. This story demonstrates the importance of assuring that individuals with limited English are considered in emergency preparedness plans.



*by Carol Borger, Administrator
Butler County Health Department*

We sent a team on Thursday, May 10, for Tetanus shots and again on Friday, May 11. Sandy, whose reply you see here, was in the Thursday group. I have never seen anything like the devastation in that town. The teams on Thursday, about eight or nine groups of nurse/clerk and a mental health personnel, covered the town by foot and car seeking people who needed Tetanus shots or wounds assessed. My team of three went outside of town to the farms to give shots as no one had been to the countryside yet. I, we, take so much for granted. There was no electricity, running water, sewer service, air conditioning, shelter or a place to rest. I was fortunate that I could come home and rest my tired feet and body, but the Greensburg residents could not. Public Health Nurses have a way of getting things done with just the bare minimum of supplies. This has made me re-think my own plans for weather events as well as my public health preparedness plans.



Holly Moore, R.N. & Christi Bradshaw, R.N. in front of the tent used for the Kiowa County Health Department during their visit to Greensburg on Wednesday, May 16, 2007.

*by Sandra DeWitt
Butler County Health Department*



Christi Bradshaw, R.N. administering a Tetanus Shot to Van Pooler of El Dorado, whose father, Ed Pooler (seated in the chair) is a Greensburg resident. His home was completely destroyed.

I was impressed with the response by all to the need for help in Greensburg. For future disasters we learned a lot about organization and resource needs. We should follow our first instinct and take what we think might be needed. No one can possibly anticipate everything. I think the nurses in charge did a fantastic job under the circumstances. Public Health Nurses as a whole are very independent and always have a better way of doing things. Regardless, everyone kept fairly calm and kept the mission in mind. Health Departments are usually run on a shoe string

budget and can't afford to purchase things that just sit around and wait to be used, however I guess we need to consider any one of us may be hit with a disaster at anytime. We probably should be prepared with a bare minimum of equipment: coolers, carts,

alcohol swabs, aprons, just to mention a few of the things that really came in handy in Greensburg. Thanks to everyone for their hard work and dedication to the town of Greensburg.

WHAT IS PUBLIC HEALTH?

To promote awareness of the Core Functions and Essential Services of Public Health, Connections will be highlighting an Essential Service of the month by utilizing *"What is Public Health?" An Orientation to the Public Health System for Participants and Spectators*. **Click on the logo** to download the completed document.

Essential Service #3: Inform, educate, and empower people about health issues.

This service involves social marketing and targeted media public communication; providing accessible health information resources at community levels; active collaboration with personal health care providers to reinforce health promotion messages and programs; and joint health education programs with schools, churches and worksites.

The following provides a sample of the activities performed under this service that impact the public's health:

- Provides health promotion and education programs
- Communicates via all aspects of media
- Conducts social marketing campaigns
- Provides accessible health information on health risks, health status and health needs
- Identifies and provides resources to facilitate healthy living



- Sponsors educational programs to develop knowledge, skills, and behavior to improve individual and community health
- Develops collaborative networks for health promotion
- Evaluates appropriateness, quality and effectiveness of public health education

Professionals who provide these services include: Public health nurses, health educators, community relations directors, environmental directors/inspectors and social workers. Questions to ask yourself to help determine if you/your agency perform functions that contribute to Essential Service #3:

- ☐ Do I/my agency provide information in any form to individuals, groups, or the community at large in the course of my normal work activities?
- ☐ Do I/my agency work with a collaborative network to provide health promotion activities?
- ☐ Do I/my agency assist in the training, evaluation, credentialing, or monitoring of staff performance and quality of work outcomes?
- ☐ Do I work in a program which helps enforce the local laws and regulations to protect the public's health and ensure safety?

If you checked one of the boxes you are performing one of the essential services of public health.

GOVERNOR'S PUBLIC HEALTH CONFERENCE



PowerPoint presentations from conference speakers can be located at the Office of Local & Rural Health (OLRH) web page by clicking on the Enterprise above.

HEALTH CENTER OF YODER OFFERS SPECIAL BIRTHING EXPERIENCE FOR FAMILIES

*By Mike Heideman, Communications Specialist
KDHE - Office of Communications*

The 2007 Governor's Public Health Conference recently came to a successful conclusion. As part of the conference's maternal and child health (MCH) focus, one group of participants toured the Birth & Women's Health Center of Yoder, a small Amish and Mennonite community several miles south of Hutchinson.

Lois Yoder, CNM, ARNP and Angel Schmutz, MSN, CNM, ARNP manage the birth center. Lois is the director with 24 years of midwifery experience, including 17 years in South America as a rural missionary and has attended more than 3,150 births. Angel is a recent graduate of the University of Kansas Medical Center in Kansas City.

"We believe that patients should be active participants in their care and that childbirth is a normal life process," stated Yoder.

During the tour, participants observed a blending of technology and traditional hometown comfort that enables the center to offer a truly unique birthing experience for expectant mothers and their families. There are two birthing rooms with quilt-covered, home-style beds and air-jet bathing tubs, along with a full-service kitchen and health education room. Skylights allow plenty of soothing, natural light to enter.



The center also has the medical staff and equipment needed to provide care for low-risk pregnancies and births, as well as a network-enabled reception desk as sophisticated as any that you would find in any hospital.

The medical director and primary collaborating physician is Tom Simpson, M.D. "The clinic is being run with very careful standards. I feel I have a good working relationship with the midwives. I am happy that we have this option available in the community," said Simpson.

Ten Amish and Mennonite churches in Reno County established the Birth & Women's Health Center of Yoder in 2004. The center, which is licensed by the Kansas Department of Health and Environment (KDHE), provides an alternative for childbearing families who anticipate a low-risk pregnancy and birth. The vision of the center is to provide women and their families a safe and welcoming retreat that respects spiritual, physical, social, psychological, and economic needs.



A certified nurse-midwife (CNM) is a registered nurse with advanced education to provide specialized health care to women of all ages, including child birth, family planning, prenatal care, gynecological care, postpartum care, and annual exams and pap smears, and menopausal counseling. Medicaid and most insurance companies in Kansas cover services provided by certified nurse-midwives.

For more information about the Birth & Women's Health Center of Yoder, please visit www.yoderbirthcenter.org.

NATIONAL ACADEMY OF STATE HEALTH POLICY SELECTS KANSAS

*by Linda Kenney, Director
KDHE - Bureau of Family Health*



Kansas has received notification from the National Academy for State Health Policy that it has been selected along with 18 other states to participate in a Commonwealth-funded national consortium, to improve early identification of young children with developmental problems. The Kansas proposal evaluates outcomes of developmental screening training of public and private providers. Ileen Meyer and Carolyn Nelson in the Bureau of Family Health at the Kansas Department of Health and Environment (KDHE) will participate along with other team members, Greta Hamm from the Kansas Health Policy Authority (KHPA) Medicaid program, and Drs. Pam Shaw and Kathryn Ellerbeck at the KU Medical Center.

BUREAU NAME CHANGE

*by Linda Kenney, Director
KDHE - Bureau of Family Health*



This month, the name of the Bureau for Children, Youth and Families in the Division of Health officially changed to the Bureau of Family Health. A concern for some time was that the name of the bureau confused the public and policy makers about the nature of its programs. The name change was planned to add the key word 'health' to the name of the bureau, to differentiate its functions from those in the state social services agency.

"We always get so many phone calls to refer to SRS," says Director, Linda Kenney. "We are excited about the name change and hope this will eliminate some of the confusion." The bureau has initiated a gradual con-version of print materials and other documents to the new name.

PUBLIC HEALTH MENTORING TURNS ON THE LIGHT BULB

*by Eldonna Chesnut
KPHA Board Member*

Many articles, conferences, and workshops address the aging work force in our country. The first time this was highlighted was when I was in nursing school. The instructors talked about the nursing shortage and how many nurses would be retiring in the future. Now almost 20 years later there is still a nursing shortage and the average age of the working nurse is in the mid-to-upper 40s. The same thing is happening with the public health workforce. Almost two years ago our health department director (a nurse) retired with almost 40 years of public health knowledge and experience. Sedgwick and Douglas counties also lost long term public health employees to retirement in the recent past. This year, two more long time public health nurses from our health department are retiring. This is happening across the state and across the country.



The "light bulb" moment I referred to, occurred while orientating a senior nursing student to our division for his five week clinical. Our health department has nursing students from several schools.

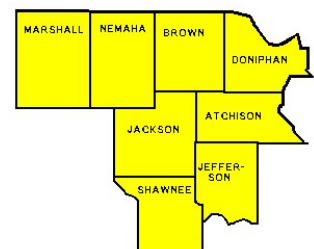
When the students are here they may be in Family Health Services (clinics), Health Education, Communicable Disease, and/or Adult and Child Care facilities. What a great opportunity to share what public health is all about! The student was a twenty- something male from Hawaii. He was very excited for his last clinical rotation and upcoming graduation. As my staff and I talked to him about Public health nursing and our division in particular, he sat there mesmerized. He stated he "didn't know we were responsible for so much." When he finished his rotation he stated that it was very eye opening to him and was so different from all the other "hospital type" rotations they had done. He stated that he had really enjoyed this experience and was glad he had the exposure to public health. I referred to our recent student as a sponge – wanting to learn everything he could as quick as he could. Because he had to do a project that would benefit the agency he was able to get a power point presentation created and research material gathered on an oral health project I was working on. For us it was truly a win-win situation

Because we are losing so much public health knowledge and people to retirement, now is the time to "ramp up" our efforts to entice and enlighten the nursing students of today, the future nurses of tomorrow, to enter the public health workforce. I would encourage all of you to contact your local nursing schools and ask them if they would like to use your public health department as a clinical site. It usually isn't that much work for the Health Department staff and in fact can be very refreshing to someone who hasn't worked with students in a while. For the student, they will get out of the rotation what they put into it. At the very least it is a chance to expose them to all the opportunities that public health offers – at best you have just recruited a new employee! For the staff it can be an "enlightening" experience that helps to revitalize how they feel about their job.



REGIONAL MEETINGS CONDUCTED VIA COMMUNITY COLLEGE TELENET SYSTEM

After months of planning and coordination, the Northeast Corner Regionalization Initiative (NCRI) conducted their first regional meeting using the telenet system through Highland Community College in Highland, Kan. in January. Through a video downlink, regional members were able to participate from four different locations (Holton, Marysville, Atchison, Highland) representing four counties in the eight county region.

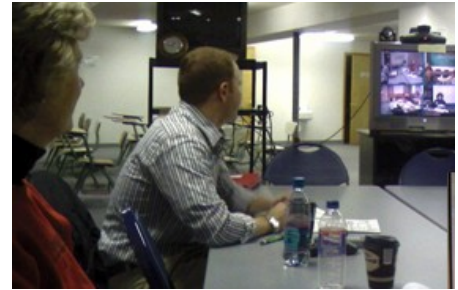


The 10 people participating in the meeting found the system to be very user-friendly. A full agenda was planned for the meeting and was completed in just an hour and a half.

Through a collaborative effort with Highland Community College, the region most recently conducted a telenet meeting on April 25, to display the capabilities for other regions and visitors participating in a state site visit. The system is now able to link directly with the Shawnee County Health Agency as well, which means that seven of the eight counties in the NCRI region have the capability to link via the telenet. The current limitation does only enable four sites to be linked simultaneously, but provides the opportunity to minimize travel time to attend meetings when utilized.

"We look forward to our continued collaboration with Highland and see this is an excellent resource to support regional communication efforts," stated Alice Weingartner, NCRI Facilitator.

For more information about this capability and how to link to local community colleges across the state, please contact Brett Starbuck at brett.starbuck@snco.us.



IMMUNIZATION TECHNOLOGY TRAINING



Immunization Technology Training will be offered in nine locations across the state from June thru September! SIGN UP TODAY at www.kalhd.org. Have you ever had to prepare information for presentation to your county commissioners or analyze statistics related to your immunization program?

The Kansas Health Foundation has funded Kansas Association of Local Health Departments (KALHD) to develop and provide technology training specific to immunization programs for local health departments. This training will provide tools to find community information that is needed to prepare presentation material that is informative and graphically engaging. KALHD has been working with members of the KU School of Medicine – Wichita Chautauqua Project staff to design a computer training that utilizes a variety of data sources, such as, QS Insight, the Internet, and KS WebIZ, to query, combine and analyze immunization data. In addition, the training will provide instruction on creating charts and graphs for presentation from the analyzed immunization data.



It is hoped that each health department will send one employee to this training. Trainings will be held from 10 a.m. to 3 p.m. and lunch will be provided. Below is a list of scheduled training sites and dates. For more information and to link to registration on KS TRAIN, go to www.kalhd.org.

1. Sedgwick County: Wednesday, June 27
2. Haskell County: Wednesday, July 11
3. Brown County: Wednesday, July 25
4. Pawnee County: Tuesday, July 31
5. Labette County: Wednesday, Aug. 1
6. Lyon County: Wednesday, Aug. 8
7. Cloud County: Wednesday, Aug. 22
8. Decatur County: Wednesday, Aug. 29
9. Sedgwick County: Wednesday, Sept. 12

CHANGES IN MEDICAID PHARMACY CLAIM FORMS

*by Mary Lesperance
Kansas Health Policy Authority*



Effective May 23, K.S.A. 39, 7-121f(c), mandates that all Medicaid pharmacy claim forms include the prescriber's unique identification number. The Kansas Health Policy Authority (KHPA) will be requiring individual National Provider Identifier (NPI) numbers for all prescribers who prescribe medications to Medicaid beneficiaries. The prescriber's

INDIVIDUAL NPI must be obtained and then sent to Kansas Medical Assistance Program (KMAP) for posting on a Web site for pharmacy providers to access. Pharmacy providers will use the NPI information to process the claims as required by state law for Medicaid beneficiaries. Prescribers will not be allowed to use the group or entity NPI because this would not allow for the required unique prescriber identification. The link for information on how to obtain an NPI is: <http://www.cms.hhs.gov/NationalProvIdentStand/>.

After the individual NPI is obtained, the attached form should be completed and faxed to: (785) 296-4813 or mailed to: Mary Lesperance, Landon State Office Building (LSOB), 900 SW Jackson, Room 900 N, Topeka, KS 66612. For a copy of the form click on Centers for Medicare and Medicaid Services (CMS) logo above.

ENVIRONMENTAL PUBLIC HEALTH



In these days of climate change, avian influenza, and natural disasters, it is an unsettling reality that coordination among health and environmental programs is often limited. Often policy decisions are made without the benefit of integrated health and environmental data.

KDHE is uniquely positioned to cultivate capacity for environmental public health because of the combined health and environment structure of the agency. The agency is committed to a vision of greater diffusion of data and collaborative efforts among agency programs. However, scientific perspectives, technological differences, and competing priorities among programs contribute to a gap of information sharing. Health professionals and environmental scientists operate with different vocabularies

and acronyms and collect data into disparate information management systems, creating some of the most obvious barriers. Add to the basic differences in infrastructure a range of funding streams and public and political demands, and quickly the challenges of exchanging and integrating information abound.

At its core, public health has long utilized environmental science in making health policy decisions. Most professionals in public health know about Dr. John Snow's recommendation to remove the Broad Street pump handle to curtail the 1850's cholera outbreak in London. How many are aware that there was a statistically significant drop in children being seen in hospitals for asthma symptoms during the 1996 Summer Olympics and decreased ozone in Atlanta, Georgia where many roadways were closed to through traffic except by public transportation? Most environmental regulations are derived from health based standards.

In the interest of integrating information KDHE has begun the development of environmental health indicators, participates nationally on several environmental public health initiatives, has drafted non-infectious disease cluster investigation policy and guidelines (under review), in addition to providing increased interface between environmental and health programs. The Kansas Childhood Lead Poisoning Prevention Program, Environmental Health Officer and Bureau of Environmental Remediation work together where lead contamination may be posing a problem for the health of children in communities. Bureau of Air and Radiation staff are developing web-site graphics to illustrate air quality trends in Kansas counties as well as the environmental indicators data.

These collaborations are tangible evidence of the importance of EPH professionals stepping outside their "comfort" zones and working with those in other disciplines to create a more comprehensive picture of public health in Kansas.

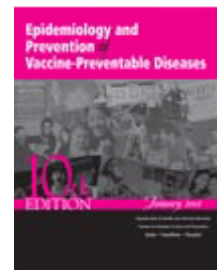
THE PINK BOOK IS HERE



The Public Health Foundation is pleased to announce the availability of the 10th edition of "Epidemiology and Prevention of Vaccine-Preventable Diseases" (The Pink Book). The Pink Book is developed and published by the National Immunization Program, Centers for Disease Control and Prevention.

The Pink Book provides physicians, nurses, nurse practitioners, physician assistants, pharmacists, and others with the most comprehensive information on vaccine-preventable diseases. All chapters have been updated and the 10th edition includes new information on several vaccines--rotavirus, human papillomavirus, and zoster (shingles).

You may order online at http://bookstore.phf.org/product_info.php?cPath=45&products_id=552 or call (877) 252-1200. For questions, please contact Linda Wilburn at lwilburn@phf.org or (202) 218-4404.



FULL-TIME SANITARIAN NEEDED FOR JOHNSON COUNTY



The Johnson County Public Health Department, is seeking a sanitarian on a full-time basis. The sanitarian will conduct the environmental part of the nursing facility survey in conjunction with the Kansas Department on Aging (KDOA) survey team; will conduct monitoring visits in conjunction with the adult care nurse on large or problematic adult care facilities; will conduct and/or assist with child care visits, to include, initials, renewals, complaints and compliance checks; will process licensing amendments as received from

child care facilities; will conduct classes, consultations and workshops on licensing regulations and other environmental health/safety issues; will assist with visits/investigations involving problematic septic systems, private wells, private swimming pools and playgrounds and will conduct visits/investigations involving lead, food safety and other environmental health and safety concerns.

Requires a bachelor's degree in environmental health, or a related field. The successful candidate must possess a minimum of two-to-three years of regulatory experience in adult care facilities, child care facilities or public health. The successful candidate must also possess one-to-two years of working experience with problematic septic systems, wells and pools; requires a Registered Sanitarian Certification (or eligible to set for exam-exam would need to be taken and passed within six months of hire). Requires a criminal history check and a valid driver's license and must be able to drive in all weather conditions. For complete details and to apply on-line, visit <http://hr.jocogov.org>; or fax resume to (913) 715-1419; or mail to: Johnson County Human Resources; 111 S. Cherry, Suite 2600; Olathe, KS 66061. EOE

PART-TIME HIV/STD NURSE SOUGHT FOR JOHNSON COUNTY HEALTH DEPARTMENT

The HIV/STD Nurse provides nursing assessment, counseling and education for women's/men's health clients for health issues; provides screening services and obtains laboratory specimens for women's/men's health clients; evaluates findings of screening services and laboratory specimens for women's/men's health clients; develops plan of care and makes appropriate referrals for women's/men's health clients; dispenses medications and administers injection medications per protocol for women's/men's health clients; records data accurately and thoroughly in client's confidential medical records as documentation of services rendered, procedures performed and follow-up obtained; records accurate statistical data used to report program information; maintains knowledge base of all Family Health Services Programs to determine client or staff needs and make appropriate referrals to clinical services or other community providers; contributes to a smooth, functioning of Family Health Services through effective working relationships/communication with peers and Public Health Department staff and provides assistance in other Family Health Services Programs as needed.

Requires an associate's degree in nursing; bachelor's degree in nursing is preferred. With associate's degree, must possess two years of nursing experience; one being in a public health nursing related field. Preferred qualifications: bachelor's degree in nursing with one year of experience in a hospital, clinic or a public health setting. Requires a valid driver's license and must be a Registered Nurse in the state of Kansas. Position will require exposure to fumes and/or chemicals; must be able to lift 10-20lbs; emergency essential position; travel required 10 percent of time.

For more information contact Stacy Barr, Recruiter, Johnson County Government at (913) 715-1412 or www.jocogov.org.

LINKS

Trauma



The Kansas Trauma System is dedicated to reducing the death, disability and suffering that results from traumatic injuries and mass casualty events by providing a comprehensive and integrated system of statewide prevention and trauma care resources throughout the continuum of care. Click on the Trauma logo to learn more about the Kansas Trauma Program's "Golden Hour" (10-minute video).

Regional Public Health Meetings and Billing Workshops

Click on the **Public Health sign** to view dates, times, and locations of Regional Public Health meetings and Billing Workshops.



**LOCAL HEALTH SECTION
OFFICE OF LOCAL & RURAL HEALTH**

<p style="text-align: center;">Shirley Orr Director, Local Health 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-7100 Cell phone –316-250-6940 Fax number 785-296-1231 E-mail address – sorr@kdhe.state.ks.us</p>	
<p>Jon Anderson PH Nurse Specialist 1500 W. 7th Chanute, KS 66720-9701 Office phone – 620-431-2390 Cell phone 785-231-9828 Fax number – 620-431-1211 E-mail address – janderso@kdhe.state.ks.us</p>	<p>Linda Frazier PH Workforce Development Coordinator/DLC 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-3641 Cell phone – 785-231-4504 Fax number – 785-296-1231 E-mail address – lfrazier@kdhe.state.ks.us</p>
<p>Vacant PH Nurse Specialist 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-1200 Cell phone – Fax number - 785-296-1231 E-mail address –</p>	<p>Debbie Nickels Kansas TRAIN Administrator 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-291-3457 Cell phone – 785-231-4503 Fax number – 785-296-1231 E-mail address – dnickels@kdhe.state.ks.us</p>
<p>Jerry Tenbrink Training Coordinator/PH Preparedness 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-291-3241 Cell Phone – 785-231-4502 Fax number – 785-296-1231 E-mail address – jtenbrink@kdhe.state.ks.us</p>	<p>Debbie Whitmer PH Nurse Specialist 2501-D Market Place Salina, KS 67401-7699 Office phone –785-827-9639 Cell phone – 785-452-5986 Fax number – 785-827-1544 Email address – dwhitmer@kdhe.state.ks.us</p>